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SERIAL NUMBER 10/518,900	FILING OR 371(c) DATE 09/27/2005 RULE	CLASS 604	GROUP ART UNIT 3767	ATTORNEY DOCKET NO. P08517US00/RFH
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**APPLICANTS**

Ian Samson, London, UNITED KINGDOM;  
 Ian Webb, London, UNITED KINGDOM;

**\*\* CONTINUING DATA \*\*\*\*\***

This application is a 371 of PCT/GB03/02633 06/19/2003

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***

UNITED KINGDOM 0214525.8 06/24/2002

ERM

8/26/06

**\*\* SMALL ENTITY \*\***

Foreign Priority claimed	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY	SHEETS DRAWING	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119 (a-d) conditions met	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after allowance	UNITED KINGDOM	8	20	2

**ADDRESS**

00881

**TITLE**

Breast pump

<b>FILING FEE RECEIVED</b> 515	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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